		PART I	B - FEE(S)	) TRA	NSMITTAL				
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STEPHEN M. NI DYKAS, SHAVEF PO BOX 877 BOISE ID 83701 06/06/2005 YPULITE2 000		Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being depos States Postal Service with sufficient postage for first class addressed to the Mail Stop ISSUE FEE address above, transmitted to the USPTO (703) 746-4000, on the date ind			smission  g deposited with the United  rst class mail in an envelope s above, or being facsimile date indicated below.				
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					June 4, 20	005 /		(Date)	
APPLICATION NO.	FILING DATE		FIRST NAME	RST NAMED INVENTOR		ATTORNEY	DOCKET NO.	CONFIRMATION NO.	
10/785,580	10/785,580 02/23/2004 Dane Sca				ugh LEVL113			9921	
APPLN. TYPE nonprovisional	SMALL ENTITY NO	ISSUE FEE \$1400		PU	S300	TOTAL FEE(S) DUE \$1700		DATE DUE 06/20/2005	
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EXAMINER GUADALUPE, YARITZA		ART UNIT 2859		CL	ASS-SUBCLASS	l			
1. Change of correspondence					033-414000				
CFR 1.363).		,	2. For printing on the patent front p  (1) the names of up to 3 registered			· .stebii		en M. Nipper	
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Irwin Indust	crial Tool Co	mpany	Hui	nter	sville, NC				
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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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TRANSN	IITTAL OF PAYME	Docket No.									
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Applicant(s): D	ANE SCARBOROUGH				4						
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Application N	1 -	Examiner	r	Customer No.	•	Confirmation No.					
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	Transmittal Form PTO										
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